

AUGUST 18, 2000

## INSPECTOR GENERAL INSTRUCTION 1422.1

SUBJECT: Time and Attendance Reporting - Civilian Pay System

References: See Appendix A.

**A. Purpose.** This Instruction implements the time and attendance (T&A) reporting requirements of the Office of the Inspector General, Department of Defense (OIG, DoD). It establishes policies, assigns responsibilities, defines terms and prescribes procedures and internal controls in support of the T&A recording and reporting requirements of the Defense Civilian Pay System (DCPS).

**B. Cancellation.** This Instruction supersedes IGDINST 1422.1, *Time and Attendance Reporting-Civilian Pay System*, dated March 23, 1998.

**C. Applicability and Scope.** This Instruction applies to offices of the Inspector General, Deputy Inspector General, Assistant Inspectors General, the Director of Departmental Inquiries, Director of Intelligence Review, Director of Administration and Information Management (hereafter referred to as OIG components).

### **D. Policy**

1. **Single Point of Contact.** The OIG, DoD, will maintain a single point of contact, the OIG DCPS Customer Service Representative (CSR), located in the Personnel and Security Directorate, Office of Administration and Information Management (OA&IM), to answer and resolve timekeeping and payroll questions and problems and to act as liaison between OIG, DoD, employees and the DCPS operation.

2. **Training.** All OIG, DoD, personnel assigned T&A duties will be fully trained before performing their T&A assignments.

3. **Management Controls.** The OA&IM will exercise T&A program oversight. Management controls for T&A will meet the standards contained in references a and b and will be annually evaluated according to the requirements of reference c.

4. **T&A Record Documentation.** The official OIG, DoD, employee T&A record shall consist of (1) the OIG, DoD, *Employee Time Log*, IG Form 1422.1-2 (Appendix C), or the *Biweekly Activity Report*, DCIS Form 54; and (2) T&A backup documentation, such as Standard Form (SF) 71, *Application for Leave*, requests, required by reference d.

5. **T&A Accountability.** All persons responsible for reporting, approving, reviewing or processing T&A information, whether in electronic or paper form, will be held accountable for its accuracy, integrity and security.

6. **Violations.** Employees, regardless of grade, will immediately report T&A violations or internal control weaknesses, including security violations, to supervisors in their chain of command.

**E. Responsibilities.** The following personnel will be responsible for T&A reporting:

1. **OIG, DoD, DCPS CSR** will:

- a. Answer and coordinate resolution to timekeeping and payroll problems.
- b. Ensure that OIG, DoD, timekeepers and T&A-responsible supervisors are trained before performing their T&A duties.
- c. Maintain the OIG, DoD, official list of timekeeping groups and personnel authorized access to the DCPS and perform the duties required under reference e.
- d. Protect his or her DCPS passwords according to references f and g and internal OIG component requirements.
- e. Distribute DCPS-generated Leave Balance and Hours Conversion Reports to designated OIG component supervisors.

2. **OIG Component Heads** will:

- a. Ensure that T&A information is accurately reported by each employee regardless of grade, including detailees, approved by a supervisor, and transmitted to payroll by a timekeeper in accordance with this Instruction.
- b. Ensure that T&A accuracy, integrity and security are monitored and evaluated under reference c and hold employees accountable for accurately and completely reporting T&A; supervisors for approving, reviewing and controlling T&A; and timekeepers for inputting and documenting T&A records.
- c. Ensure that supervisors and timekeepers are cognizant of exceptions to an employee's normal tour of duty and that such exceptions are posted to the individual's T&A record.
- d. Designate an overall responsible T&A-trained employee(s) who will serve as OIG component liaison to the OIG, DoD, DCPS CSR.

3. **Supervisors.** Supervisors are responsible for approving and signing T&A documents of employees in OIG, DoD, Time and Attendance Groups (TAG) and for reviewing the accuracy of electronic T&A input by the assigned timekeepers. Supervisors shall perform their T&A duties according to established OIG, DoD, T&A policies and procedures and manage the performance of their assigned timekeepers. Supervisors may delegate parts of their T&A authority, but under no circumstance will they delegate any part of their T&A responsibilities. Supervisors shall be ultimately responsible for protecting T&A accuracy, integrity and security,

including DCPS passwords according to references f, g, k and l and internal OIG component requirements.

4. **Timekeepers.** Each OIG, DoD, TAG will have one timekeeper and alternate(s) responsible for electronically transmitting T&A data for employees in the TAG. Timekeepers and alternates shall be responsible for protecting T&A accuracy, integrity and security, including DCPS passwords according to references f, g, k and l and internal component requirements.

5. **OIG, DoD, DCPS Component Liaison** shall be authorized to input and transmit T&A data on the last day of payroll transmission for any timekeeping group within the OIG component in the event the TAG timekeeper or alternate is not able to perform his or her T&A duties; assist employees experiencing T&A and payroll problems and to consult with the OIG DCPS CSR if needed; and assist supervisors in monitoring implementation in accordance with this Instruction.

6. **OIG Employees** shall report T&A information in a timely and accurate manner in accordance with established OIG T&A policies, mandated procedures and external requirements. Employees are responsible for knowing their leave balances when requesting leave and for identifying the correct leave codes.

## **F. Procedures**

1. **Request for Established Tour of Duty.** Subject to supervisory approval, employees may elect to work an alternative work schedule, as defined in reference k. Employees will request approval to establish or change a tour of duty by completing all applicable parts of the form at Appendix B.

2. **T&A Reporting.** The OIG, DoD, uses the T&A component of the DCPS for reporting T&A and selected personnel data. The OIG, DoD, uses organizational codes as T&A reporting groups, as required by the DFAS DCPS. Regardless of whether an employee is working an alternate work schedule, he or she must use IG Form 1422.1-2, *OIG Employee Time Log* (Appendix C), to record and certify his or her daily arrival and departure times, leave, overtime pay hours worked, overtime worked as compensatory time, compensatory time taken, etc. (Criminal investigators will use IG DCIS Form 54, *Biweekly Activity Report*, instead of IG Form 1422.1-2.) Employees who have been approved to participate in the OIG Flexiplace Program, as defined in reference m, will complete IG Form 1400.620-1, *Flexiplace Time Log*, (Appendix D).

3. **T&A Recording and Approving.** Each employee's pay period T&A record, including T&A backup documentation, shall be approved and signed by the employee's officially designated supervisor or the second-level supervisor. Presumptive T&A may be reported, approved and electronically transmitted, as appropriate, as long as the data is subsequently verified by post-transmission T&A reconciliation (see paragraph F.4.). Employees and their supervisors should sign and submit T&A documents no earlier than the second Thursday before DCPS processes payroll. Timekeepers shall input T&A no later than the second Friday before payroll is processed. Timekeepers shall input corrections and missing T&A on the immediate Monday and Tuesday immediately preceding payroll. Exceptions to these time frames will be announced by the OIG CSR to account for holidays and other events. Under no circumstance will T&A documents be self-approved by an employee, regardless of grade, or by an OIG, DoD,

employee who is lower in grade than the reporting employee. Detailed procedures for keeping and approving T&A documents are contained under references d, e, h, i, j, k and l.

4. **Reviewing Pay Period Input Accuracy.** Supervisors shall review the accuracy of T&A pay period electronic input by reconciling each employee's approved and signed T&A documentation with the DCPS Master Time History Sequential Report (MTHSR) within 30 working days after the end of each pay period. Supervisors shall initial the MTHSR to document the reconciliation. The "Display Reversals" field shall be set to "yes" to display pay period input changes. (The MTHSR is located in the DCPS T&A Menu and is available no earlier than the first Thursday after the end of a pay period.) Under no circumstance will an employee reconcile his or her own T&A input or records.

5. **Approving and Recording OIG, DoD, Retroactive T&A Changes.** The OIG, DoD, retroactive T&A changes are adjustments made to an employee's T&A DCPS on-line records by OIG, DoD, DCPS users after DCPS has processed the employee's payroll. Before inputting retroactive changes, timekeepers must have in their possession an employee's amended time log and associated T&A backup documentation showing the approved retroactive changes. Employees and supervisors must initial and date the retroactive changes. After inputting retroactive changes, the timekeeper must print a MTHSR showing the retroactive changes and obtain the initials of the supervisor on the MTHSR.

6. **Electronic T&A Transmission.** Detailed procedures for electronically transmitting approved T&A data are contained in references e and l.

## **G. Internal Controls**

1. An OIG, DoD, approved T&A record is required for each OIG, DoD, employee, regardless of grade, for each pay period. The record will be maintained and completed by the individual employee. The times and time allocation reported on the record will be actuals, not estimates. The record accounts for all of an employee's time during the pay period, to include annual, sick, military, administrative leave, etc. No employee will be paid without a properly completed and authorized OIG, DoD, employee T&A record.

2. A timekeeper will not transmit his or her own T&A data to DFAS DCPS, including any T&A updates or corrections. Primary and alternative timekeepers will transmit each other's T&A data.

3. Under no circumstance will timekeepers transmit T&A data without first verifying that all employee T&A records and associated backup documentation are complete and signed by both the employee and his or her supervisor. Time and attendance documents completed in pencil or containing white-outs will not be accepted for input. Inked corrections are acceptable if they contain employee and supervisor initials.

4. Supervisors shall report discrepancies found when approving or reconciling T&A documents to their cognizant second-level supervisors for resolution if the discrepancy is not satisfactorily resolved within 5 working days of the detection. A copy of the report will be sent to the OIG, DoD, DCPS CSR.

5. Components shall establish, maintain and document a management control system under reference c to ensure T&A accuracy, integrity and security.

6. Components shall ensure that passwords used to access the DCPS are protected from unauthorized use, as defined by references f and g and internal component requirements that may be established to ensure password protection. Under no circumstance shall passwords be shared among timekeepers or supervisors, or with anyone else.

7. The T&A documents will be kept in a lockable container for the period of time required by references h and i. Under no circumstance will employees be given unsupervised access to their own T&A documents after they have signed and submitted the documents for approval.

8. The OA&IM will conduct random internal reviews of OIG, DoD-wide retroactive T&A changes and of OIG component compliance with OIG, DoD, T&A policy and the effectiveness of T&A internal controls.

9. Components may implement additional T&A controls to meet component-unique vulnerabilities and levels of internal control assurance.

**H. Effective Date.** This Instruction is effective immediately.

FOR THE INSPECTOR GENERAL:

//Signed//  
Joel L. Leson  
Director  
Office of Administration  
and Information Management

4 Attachments

- A. References
- B. Request to Establish a Tour of Duty
- C. Employee Time Log
- D. Flexiplace Time Log

## APPENDIX A REFERENCES

- a. General Accounting Office Policy and Procedures Manual for Guidance of Federal Agencies, "Standards for Internal Controls in the Federal Government," November, 1999
- b. General Accounting Office Policy and Procedures Manual for Guidance of Federal Agencies, "Revisions to Title 6 on Pay, Leave, and Allowances," Transmittal Sheet No. 6-33, March 22, 1996
- c. IGDINST 5010.38, *Internal Management Control*, July 2, 1997
- d. IGDINST 1424.630, *Leave Administration Policy and Procedures*, December 16, 1991
- e. Defense Civilian Pay System (DCPS) Customer Service Representative Users Manual, Release 99-4, October 10, 1999
- f. IGDINST 7920.5, *Inspector General Small Computer Use*, August 21, 1997
- g. IGDINST 7950.4, *Microcomputer Antivirus Initiative*, November 17, 1997
- h. IGDM 5015.2, *Records Management Program*, June 2000
- i. 32 CFR, Part 312, "Office of the Inspector General (OIG) Privacy Program"
- j. OIG Manual Part 1, Chapter 4, "Use and Control of Overtime," May 9, 1984
- k. IGDR 1400.610, *Alternative Work Schedules Program*, January 1, 1998
- l. DCPS Time and Attendance Users Manual Release 99-4, October 10, 1999
- m. IGDR 1400.620, *Flexiplace Program*, January 15, 1998

## APPENDIX B

### IGFL 1422.1-1, REQUEST TO ESTABLISH A TOUR OF DUTY

MEMORANDUM FOR \_\_\_\_\_ (Supervisor)

SUBJECT: Request to Establish a Tour of Duty

Under the provisions of the OIG, DoD, Alternative Work Schedules Program, I hereby request approval to work the following schedule:

\_\_\_\_\_ **Standard Schedule:** 8:00 a.m. to 4:30 p.m. daily, Monday through Friday, with a daily unpaid lunch period. I understand that I will not be permitted to earn or use credit hours.

\_\_\_\_\_ **Flexitour:** 8 hours/day, 40 hours/week, Monday through Friday; a daily unpaid lunch period; **fixed** start time of not earlier than 6:30 a.m. and a **fixed** stop time of not later than 6:00 p.m.; and covering the mandatory core hours of 9:00 a.m. through 3:00 p.m.

Daily Starting Time: \_\_\_\_\_ Daily Quitting Time: \_\_\_\_\_

\_\_\_\_\_ **Gliding Schedule:** 8 hours/day, 40 hours/week, Monday through Friday; a daily unpaid lunch period; gliding start time of not earlier than 6:30 a.m. and a gliding stop time of not later than 6:00 p.m.; and covering the mandatory core hours of 9:00 a.m. through 3:00 p.m.

Daily Gliding Starting Time:

*Between the hours of \_\_\_\_\_ a.m. and \_\_\_\_\_ a.m.*

Daily Gliding Quitting Time:

*Between the hours of \_\_\_\_\_ p.m. and \_\_\_\_\_ p.m.*

\_\_\_\_\_ **5/4-9 Compressed Work Schedule:** In a biweekly pay period with nine workdays and one scheduled day off falling on Mondays through Fridays, will work eight 9-hour workdays and one 8-hour workday with a daily unpaid lunch period; **fixed** start time of not earlier than 6:30 a.m. and a **fixed** stop time of not later than 6:00 p.m.; and covering the mandatory core hours of 9:00 a.m. through 3:00 p.m. I understand that I will not be permitted to earn or use credit hours.

For eight 9-hour days: Starting Time: \_\_\_\_\_ Quitting Time: \_\_\_\_\_

For one 8-hour workday: Starting Time: \_\_\_\_\_ Quitting Time: \_\_\_\_\_

8-hour workday will be \_\_\_\_\_ of the first or second (circle one) week of a biweekly pay period. (Day of the Week)

Biweekly day off will be \_\_\_\_\_ of the first or second (circle one) week of a biweekly pay period. (Day of the Week)

I have read IG Regulation 1400.610, "*Alternative Work Schedules Program*," and understand my obligations and responsibilities under the Program. I understand that the Program is a privilege, not an entitlement, and that my privileges under the Program may be modified, denied or restricted to ensure efficient and effective accomplishment of mission requirements or if I do not comply with my obligations and responsibilities under the Program.

\_\_\_\_\_ (Employee Signature) \_\_\_\_\_ (Date)

**Management's certification of employee's Alternative Work Schedules request:**

Approved / Disapproved (Circle one). Approved plan will be effective with the pay period beginning on \_\_\_\_\_ .

\_\_\_\_\_ (Approving Authority) \_\_\_\_\_ (Date)

OIG EMPLOYEE TIME LOG																	
This form is subject to the Privacy Act of 1974.																	
SOCIAL SECURITY NUMBER		EMPLOYEE NAME						OIG COMPONENT				PAY PERIOD ENDING					
BASIC WORK REQUIREMENT (BWR) (TOUR OF DUTY) (Enter time in appropriate block below.)																	
Standard Schedule			Gliding Schedule					Flexitour				Compressed 5/4-9					
		WEEK 1							WEEK 2								
DAY OF WEEK ➡	1	2	3	4	5	6	7	1	2	3	4	5	6	7		CREDIT/COMP HOURS BALANCES	
DATE ➡																	
TYPE OF CHARGE	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL	GLIDING AND FLEXTOUR ONLY. CANNOT EXCEED 24 HOURS. REQUIRES PRIOR APPROVAL OF SUPERVISOR ON REVERSE TO EARN OR TAKE.	
TIME IN																	
TIME OUT																	
TIME IN																	
TIME OUT																	
BWR HRS WORKED																BAL. PRIOR PP: _____	
CREDIT HOURS TAKEN																WORKED THIS PAY PERIOD: _____	
COMP HOURS TAKEN																TAKEN THIS PAY PERIOD: _____	
ANNUAL LEAVE TAKEN																CARRY OVER TO NEXT PP: _____	
SICK LEAVE TAKEN																Comp Hours:  BALANCE FROM PRIOR PP: _____  WORKED THIS PP: _____  TAKEN THIS PAY PERIOD: _____  CARRY OVER TO NEXT PP: _____	
OTHER LEAVE TAKEN (CODE)																	
BWR TOTAL																	
CREDIT HRS WORKED																	
OVERTIME COMP HRS WORKED																	
PAID OVERTIME WORKED																	
TOTAL ALL HOURS																	
EMPLOYEE CERTIFICATION: This is to certify that the above accurately reflects the hours I have worked to include additional hours worked with prior supervisory approval. Leave charges accurately reflect my use of leave during this period.								OTHER LEAVE CODE: LA –Annual      LH – Holiday      LY - Time Off Award      LM – Military      KA – LWOP LN – Administrative      LS - Sick      CD - Compressed Day Off      LC – Jury      KB – Suspension									
EMPLOYEE CERTIFICATION				DATE				SUPERVISORY APPROVAL							DATE		

### PRIVACY ACT STATEMENT

Section 6311 of Title 5 to the U.S. Code authorizes collection of this information. The primary use of this information is by management and your payroll office to approve and record your use of leave. Additional disclosures of the information may be: To the Department of Labor when processing a claim for compensation regarding a job connected injury or illness; to a State unemployment compensation office regarding a claim; to Federal Life Insurance or Health benefits carriers regarding a claim; to a Federal agency when conducting an investigation on you for employment or security reasons; to the Office of Personnel Management or General Accounting Office when the information is required for evaluation of leave administration; and to the General Services Administration in connection with its responsibilities for records management.

Where the employee identification is your Social Security Number, collection of this information is authorized by Executive Order 9397. Furnishing the information on this form, including your Social Security Number, is voluntary, but failure to do so may result in disapproval of this request.

APPROVAL TO WORK CREDIT HOURS			APPROVAL TO TAKE CREDIT HOURS			Explanation of Other Leave Code O:
HOURS	DATE	SUPERVISOR INITIALS	HOURS	DATE	SUPERVISOR INITIALS	

**APPENDIX D**  
**IG FORM 1400.620-1, FLEXIPLACE TIME LOG**

**FLEXIPLACE TIME LOG**

This form is subject to the Privacy Act of 1974.																
EMPLOYEE NAME							SOCIAL SECURITY NUMBER				PAY PERIOD ENDING					
<b>BASIC WORK REQUIREMENTS (BWR) (TOUR OF DUTY)</b> <b>PRIVACY ACT STATEMENT:</b> Section 6311 of Title 5 of the U.S. Code authorize of this information. The primary use of this information is by management and your payroll office to approve and record your use of leave. Additional disclosures of the information may be: To the Department of Labor when processing a claim for compensation regarding a job connected injury or illness; to a State unemployment compensation office regarding a claim; to Federal Life Insurance of Health Benefits carriers regarding a claim; to a Federal, State, or local law enforcement agency when your agency becomes aware of a violation of civil or criminal law; to a Federal agency when conducting an investigation on you for employment or security reason; to the Office of Personnel Management or General Accounting Office when the information is required for evaluation of leave administration; and to the General Services Administration in connection with its information on this form, including your Social Security Number, is voluntary, but failure to do so may result in disapproval of this request.																
TYPE OF CHARGE	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL	OTHER LEAVE CODE
TIME IN																A - Administration
TIME OUT																H - Holiday
TIME IN																L - LWOP
TIME OUT																J - Jury Duty
TIME IN																M - Military
TIME OUT																W - AWOL
TIME IN																S - Suspension
TIME OUT																O - Other (Explain)
TIME IN																
TIME OUT																
BWR HOURS WORKED																REMARKS
ANNUAL LEAVE TAKEN																
SICK LEAVE TAKEN																
OTHER LEAVE TAKEN (CODE)																
BWR TOTAL																
TOTAL HOURS																
<b>EMPLOYEE CERTIFICATION</b> The above accurately reflects the hours I have worked and the distribution I wish to make of them. Leave charges accurately reflect my use of the leave during this period.																
Supervisory Approval								Employee Signature								

IG Form 1400.620-1 June 2000